



## 2023–2024 Undergraduate Scholarship Application

The Colorado Association of Stormwater and Floodplain Managers (CASFM) has a **\$4,000** scholarship available for the 2023–2024 academic year. Finished application packages must be received by **October 29, 2023**.

Email completed application and  
essay by **October 29, 2023** to  
Dan Hill, [dhill@mhfd.org](mailto:dhill@mhfd.org).

### Purpose

Promote interest in the CASFM organization and their goals among students and the engineering community. Applicants must be enrolled in an undergraduate program closely related to CASFM's goals at a college or university in Colorado at the sophomore or junior level and be registered to take at least 10 credit hours of coursework per semester. Eligible programs of study include, but are not limited to: civil engineering, environmental engineering, hydrology, hydraulics, watershed management, floodplain management, stormwater management, stormwater quality, emergency response, meteorology, and climatology. The scholarship recipient will also have the option to make a brief presentation on their research project at 2024 CASFM Conference September 30–October 3 in Beaver Creek. Registration and three nights' lodging at the conference is included if the recipient commits to accepting the award at the CASFM annual lunch meeting at the conference. Visit [www.casfm.org](http://www.casfm.org) for more information.

### Selection Process

Previous Undergraduate Scholarship recipients are not eligible. Three applicants will be short-listed based on this application and a short essay (up to 500 words; attach to application) describing their personal and career goals and how they relate to the goals of CASFM. Preference will be given to local applicants. Short-listed applicants will be notified by **November 13, 2023**. A panel will hold a short (approximately 20 minute) interview with short-listed applicants in mid-November. The successful candidate will be notified by **December 1, 2023**. Funds will be disbursed by check directly to the student.

### Permission to Release Information

By signing this application, I certify that the information contained in this application is true and correct, and I authorize CASFM and its delegates to confirm and/or release any information included on this application. Signature is required to be considered for this scholarship.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## General Information

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

School Address: \_\_\_\_\_

## Academic History

### Current College/University (at which scholarship would be applied)

Name: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Address: \_\_\_\_\_

Date Admitted: \_\_\_\_\_

Advisor: \_\_\_\_\_

Credits, Fall 2023: \_\_\_\_\_

Credits, Spring 2024: \_\_\_\_\_

Anticipated Degree and Date: \_\_\_\_\_

GPA: \_\_\_\_\_

### Previous College/University

Name: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Address: \_\_\_\_\_

Date Admitted: \_\_\_\_\_

Advisor: \_\_\_\_\_

Degree and Date: \_\_\_\_\_

GPA: \_\_\_\_\_

## High School

Name, City & State: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

## References

Please provide three references, either academic, professional, or personal.

### Reference 1

Name: \_\_\_\_\_

Employer/Position: \_\_\_\_\_

Address: \_\_\_\_\_

Type (circle one): Academic / Professional / Personal

Phone: \_\_\_\_\_

Dates Known: \_\_\_\_\_

### Reference 2

Name: \_\_\_\_\_

Employer/Position: \_\_\_\_\_

Address: \_\_\_\_\_

Type (circle one): Academic / Professional / Personal

Phone: \_\_\_\_\_

Dates Known: \_\_\_\_\_

### Reference 3

Name: \_\_\_\_\_

Employer/Position: \_\_\_\_\_

Address: \_\_\_\_\_

Type (circle one): Academic / Professional / Personal

Phone: \_\_\_\_\_

Dates Known: \_\_\_\_\_

### Relevant Work Experience

Please list more recent experience first.

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Dates: \_\_\_\_\_  
Position: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
May we contact? Yes / No \_\_\_\_\_

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Dates: \_\_\_\_\_  
Position: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
May we contact? Yes / No \_\_\_\_\_

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Position: \_\_\_\_\_  
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